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PTO/SB/30 (04-05)

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|--|------------------------|------------------------|
| <b>REQUEST<br/>FOR<br/>CONTINUED EXAMINATION (RCE)<br/>TRANSMITTAL</b><br><br>Address to:<br>Mail Stop RCE<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 | Application Number     | 10/648,071             |
|  | Filing Date            | August 26, 2003        |
|  | First Named Inventor   | Donald C. Roe          |
|  | Art Unit               | 3761                   |
|  | Examiner Name          | Jacqueline F. Stephens |
|  | Attorney Docket Number | 7193CDQ                |
|  | Confirmation Number    | 3375                   |

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.  
 Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

- Submission required under 37 C.F.R. § 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
  - ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
    - ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
    - ☐ Other \_\_\_\_\_
  - Enclosed
    - ☒ Amendment/Reply
    - ☐ Affidavit(s)/Declaration(s)
    - ☐ Information Disclosure Statement (IDS)
    - ☐ Other \_\_\_\_\_
- Miscellaneous**
  - ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of \_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
  - ☐ Other \_\_\_\_\_
- Fees** The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.
 

☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. **16-2480**.

  - ☒ RCE fee required under 37 C.F.R. §1.17(e)
  - ☐ Extension of time fee (37 C.F.R. §§1.136 and 1.17)
  - ☐ Suspension of action fee under 37 C.F.R. 1.17(i)
  - ☐ Other \_\_\_\_\_

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED   |                          |                                  |
|---|--------------------------|----------------------------------|
| NAME (Print/Type)   | Adam J. Forman           | Reg. No. (Attorney/Agent) 46,707 |
| SIGNATURE   | <i>Adam J. Forman</i>    | DATE September 29, 2005          |
| CERTIFICATE OF MAILING OR TRANSMISSION  |                          |                                  |
| I hereby certify that I have reasonable basis to expect that, on the date shown below, this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office via fax number 703-672-9306 on the date shown below: |                          |                                  |
| NAME (Print/Type)   | Barbara A. Carver        |                                  |
| SIGNATURE   | <i>Barbara A. Carver</i> | DATE September 29, 2005          |

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send Fees and Completed forms to the following address: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

(Revised for P&amp;G use 5/27/2005)

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10/648071

## CLAIMS AS FILED - PART I

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

| RATE      | FEE     |
|-----------|---------|
| BASIC FEE | \$75.00 |
| X\$ 9=    |         |
| X42=      |         |
| +140=     |         |
| TOTAL     |         |

| RATE      | FEE      |
|-----------|----------|
| BASIC FEE | \$750.00 |
| X\$18=    | 542      |
| X84=      | 84       |
| +280=     |          |
| TOTAL     | 1179     |

SMALL ENTITY

OR  
OTHER THAN  
SMALL ENTITY

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 9=         |                |
| X42=           |                |
| +140=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$18=         |                |
| X84=           |                |
| +280=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 9=         |                |
| X42=           |                |
| +140=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$18=         |                |
| X84=           |                |
| +280=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 9=         |                |
| X42=           |                |
| +140=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$18=         |                |
| X84=           |                |
| +280=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| TOTAL CLAIMS                     | (Column 1)<br>NUMBER FILED | (Column 2)<br>NUMBER EXTRA |
|----------------------------------|----------------------------|----------------------------|
|                                  | 39                         |                            |
| FOR                              |                            |                            |
| TOTAL CHARGEABLE CLAIMS          | 39 minus 20 =              | 19                         |
| INDEPENDENT CLAIMS               | 4 minus 3 =                | 1                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |                            | <input type="checkbox"/>   |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

| AMENDMENT A                                    | (Column 1)<br>CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | (Column 2)<br>HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | (Column 3)<br>PRESENT<br>EXTRA |
|--|---|---|--------------------------------|
| Total  | 23  | 39  |                                |
| Independent                                    | 3   | 4   |                                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/>       |

| AMENDMENT B                                    | (Column 1)<br>CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | (Column 2)<br>HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | (Column 3)<br>PRESENT<br>EXTRA |
|--|---|---|--------------------------------|
| Total  | 34  | 39  |                                |
| Independent                                    | 3   | 4   |                                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/>       |

| AMENDMENT C                                    | (Column 1)<br>CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | (Column 2)<br>HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | (Column 3)<br>PRESENT<br>EXTRA |
|--|---|---|--------------------------------|
| Total  |   |   |                                |
| Independent                                    |   |   |                                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/>       |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \* If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20."
- \* If the Highest Number Previously Paid For ON THIS SPACE is less than 3, enter "3."
- The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

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